

VIA E-MAIL TO STACY.GUIDRY@LA.GOV

July 10, 2018

Ms. Stacy Guidry
Section Chief, Health Plan Management
Louisiana Department of Health
628 N. Fourth St.
Baton Rouge, LA 70802

Re: AmeriHealth Caritas Louisiana (ACLA) Response to June 25, 2018, Notice of Monetary Penalty Regarding the Updating of Provider Directories

Dear Stacy:

Please accept this response to the Louisiana Department of Health (LDH)'s June 25, 2018, Notice of Monetary Penalty Regarding the Updating of Provider Directories ("Notice") and the corresponding LDH Secret Shopper Survey Data ("Data"). Pursuant to the Notice, LDH assessed monetary penalties for ACLA's non-compliance with the required provider directory accuracy rate of at least 90% and has requested that ACLA correct the inaccurate data, through evidence of a "screenshot", by July 10, 2018.

As requested, ACLA has corrected the provider directory as evidenced by the screenshots in the attached ACLA Secret Survey Response spreadsheet ("Response"); however, there are twelve (12) determinations for which ACLA is requesting reconsideration. Each of the records for which ACLA is requesting reconsideration is indicated by an entry of "NO" in Column R. To the extent LDH agrees with ACLA's position on these records, ACLA requests that LDH recalculate the accuracy rate and reissue the Notice with the updated accuracy rate.

Methodology Considerations

To aid in remediating provider directory inaccuracies for future audit cycles and to gain a better understanding of LDH's methodology, ACLA identified the following items for which we request clarification and/or reconsideration:

- **FQHCs and large provider group linkages.**

ACLA's May 2018 provider directory audit included several provider records (as indicated on the ACLA Secret Survey Responses spreadsheet), wherein large provider groups or



organizations, such as FQHCs, have historically requested that all of their respective practitioners be linked to all of their organization's locations. This practice has traditionally been in place to account for organizational providers that had to shift practitioners, from one site to another, due to staffing needs. As a result, when the FQHC was contacted by LDH for this audit, the appointment desk indicated that "provider does not work here" or "the provider does not work at this location". While ACLA includes steps below to remediate this matter, we request LDH reconsider determinations of non-compliance for this survey. Because at least one MCO raised this as a potential issue during the question and answer period, ACLA requests clarification as to LDH's position regarding the provider directory audit methodology, as it appears to impact multiple MCOs. Row 7 of LDH's "Provider Directory Audit Methodology – Q & A" states:

Will LDH consider the fact that some large practices, particularly FQHCs, like to have all practitioners linked to all locations but when you call the appointment desk they will say they work at another location?	We would like to know more about this issue and then discuss it with the Louisiana Primary Care Association if appropriate. Typically, FQHCs are not a problem.
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- **Scoring Inconsistencies.**

ACLA's May 2018 provider directory audit included provider records (as indicated in the Response), wherein ACLA was penalized for the "accepting new patients" audit element. In accordance with the e-mail issued by LDH on May 10, 2018, "[t]he survey methodology, of providers who only accept ACLA as a secondary should be indicated with a 'no' in the accepting new patients' column." Based on LDH's guidance, ACLA understood that the secondary only factor fell under the "accepting new patients" question, not the "accepts Medicaid plan at this location" question. Taken in conjunction with FN1 of the Provider Directory Audit Methodology, which states the "accepting new patients" question will not be counted in the Q2 2018 calculations, we believe that this element should not be counted against ACLA for the May 2018 audit and request LDH reconsider its findings regarding this element. ACLA respectfully requests guidance as to LDH's requirements for compliance with this element.

- **Audit Element: Is telephone number correct?**

ACLA's May 2018 provider directory audit included several provider records (as indicated on the ACLA Secret Survey Responses spreadsheet), wherein provider records had incorrect telephone numbers. In such instances, all data elements audited were deemed noncompliant, even though the other elements were, in fact, accurate. ACLA requests that LDH consider limiting non-compliance to one element.



- **Selection Methodology: providers outside of stated parish.**

LDH audited provider records, where the provider was located outside of the designated survey parish. For example, there were providers surveyed under Bienville parish that are physically located in Webster or Lincoln parish. Where a given parish has sufficient providers for audit purposes, ACLA requests clarification regarding LDH's survey of providers outside of the designated parish. We also request that LDH reconsider the findings of non-compliance for providers outside of the designated parish in cases where sufficient providers were available inside the parish.

Remediation

In addition to the process improvements detailed in ACLA's January 3, 2018, letter in response to LDH's November 21, 2018, Notice of Action Regarding the Updating of Provider Directories, additional efforts to improve the accuracy of provider data have been implemented or are in the process of being implemented by ACLA:

- **FQHC and large provider group linkages.**

A common driver of LDH identified deficiencies is providers linked to a group that has multiple sites/locations at which the providers rotate. ACLA will conduct a thorough review of practitioners attached to organizational providers beginning with FQHC systems and update these providers' records to remove them from the provider directory where appropriate. Providers will only be loaded in the directory for the locations where they work on a regularly scheduled basis. We will continue to maintain linkage to all locations, in ACLA's claims management system, to address claims adjudication concerns in those instances where a provider covers a location that the provider does not regularly work.

- **Additional dedicated staffing.**

ACLA hired an additional senior business analyst with experience in health plan provider data in May 2018. Since hiring, the analyst has been working with ACLA's corporate internal stakeholders to identify provider data variances, implement validation processes, and manage data variance remediation.

- **Enhancements to "Provider Directory Tools".**

ACLA implemented an online provider directory feedback tool to provide directory users with a mechanism to report inaccuracies related to directory listings. This secure tool can be found on our website at www.amerihealthcaritasla.com under Member > Find a provider > Provider Directory Tools > Secure Contact Form. It is also highlighted as an option on the results page of the provider directory. This form allows members, providers,



and the community at large to notify ACLA of any discrepancies within the directory to allow prompt research and resolution of any necessary updates.

- **Internal Audit Contractor: Square Button.**

ACLA finalized a contract with a Hudson vendor, Square Button, in May 2018 to provide outbound calls to provider offices for the purpose of validating their directory entries. Square Button provided ACLA with their initial update file on June 21, 2018. ACLA will utilize the data to initiate provider outreach for demographic change verifications. Comprehensive outreach to all participating providers is scheduled to occur on a semi-annual basis.

- **Restructuring of intake process to ensure data accuracy & completeness.**

ACLA enhanced the provider credentialing intake and preload process to enhance front-end processes for provider data validation and identify providers requiring resolution of variances at the point of contracting. We realigned the responsibility of initial provider data validation with the creation of two dedicated credentialing intake specialists.

Should LDH deem this response and the attached ACLA Secret Survey Responses spreadsheet insufficient to close out this matter and prevent additional penalties, we request an opportunity to further discuss this matter prior to imposing said penalties.

Sincerely,

Kyle C. Viator
Market President